## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

LECATVED

COVER PAGELITICAL

COMMISSION

Date Received

Please type or print in ink.

NA	ME OF FILER (LAST)	CUIDIM) CE (TESTI) UIDI					
	ALVARADO GILBERT	T					
1.	Office, Agency, or Court						
	Agency Name  CITY OF SHAFTER						
	Division, Board, Department, District, if applicable	Your Position					
	CITY COUNCIL	CITY MEMBER					
	▶ If filing for multiple positions, list below or on an attachment.						
	Agency: SEE ATTACHED	Position:					
<u> </u>	Jurisdiction of Office (Check at least one box)						
	State	☐ Judge or Court Commissioner (Statewide Jurisdiction)					
	Multi-County	County of					
	City of SHAFTER	☐ Other					
3.	Type of Statement (Check at least one box)						
	Annual: The period covered is January 1, 2012, through December 31, 2012.	Leaving Office: Date Left					
	The period covered is/, through December 31, 2012.	<ul> <li>The period covered is January 1, 2012, through the date of leaving office.</li> </ul>					
	Assuming Office: Date assumed	The period covered is					
	Candidate: Election year and office sought, if	different than Part 1:					
4.	Schedule Summary	, 1					
	Check applicable schedules or "None." ► Total	number of pages including this cover page:					
	Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached					
		Schedule D - Income - Gifts - schedule attached					
	Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached					
	-or-  None - No reportable intere	on any schedule					
_	☐ Note - No reportable liftere	sis on any scriedule					
5							
	herein and in any attached schedules is true and complete. I ackr						
	I certify under penalty of perjury under the laws of the State o						
	Date Signed 3 - 3 - 2013 (month, day, year)						

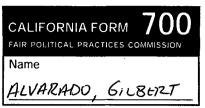
## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
ALVARADO, GILBURT

NAME OF SOURCE OF INCOME	WALLE OF COURSE OF WIGOUS
	NAME OF SOURCE OF INCOME
SEMITROPIC WATER STORAGE DISTRICT	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1101 CENTRAL AVE, WASCO, CA 93280	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
WATER STORAGE	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
SYSTEM OPERATOR	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	[] \$500 - \$1,000 [] \$1,001 - \$10,000
▼ \$10,001 - \$100,000 □ OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
✓ Salary	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	☐ Loan repayment ☐ Partnership
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other(Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	OD
retail installment or credit card transaction, made in the	nding institutions, or any indebtedness created as part of a lender's regular course of business on terms available to tus. Personal loans and loans received not in a lender's
NAME OF LENDER*	
········	INTEREST RATE TERM (Months/Years)
	,
ADDRESS (Business Address Acceptable)	INTEREST RATE TERM (Months/Years) % None
	SECURITY FOR LOAN
	%
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN  None  Personal residence
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN
ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN None Personal residence Real Property Street address
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN None Personal residence
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	SECURITY FOR LOAN None Personal residence Real Property Street address
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000  \$10,001 - \$100,000	SECURITY FOR LOAN None Personal residence Real Property Street address City Guarantor
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	SECURITY FOR LOAN None Personal residence Real Property Street address
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000  \$10,001 - \$100,000	SECURITY FOR LOAN None Personal residence Real Property Street address City
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000  \$10,001 - \$100,000	SECURITY FOR LOAN None Personal residence Real Property Street address City

# SCHEDULE D Income - Gifts



NAME OF SOURCE (Not an Acronym,	)	► NAME OF SOURCE	(Not an Acron	ym)			
BEST BEST AND K	R1E6E72						
ADDRESS (Business Address Accepta	ADDRESS (Business Address Acceptable)						
3750 UNIVERSITY	AVE #400 RIVERSIDE						
BUSINESS ACTIVITY, IF ANY, OF SO		BUSINESS ACTIVITY	Y, IF ANY, OF	SOURCE			
LAW FIRM	tw FIRM						
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)			
9,6,2012,115.59	BB&K DINNER		\$				
\$			\$				
\$			\$				
NAME OF SOURCE (Not an Acronym	)	► NAME OF SOURCE	(Not an Acron	ym)			
ADDRESS (Business Address Accepta	ble)	ADDRESS (Business	s Address Acce	ptable)			
BUSINESS ACTIVITY, IF ANY, OF SO	BUSINESS ACTIVITY, IF ANY, OF SOURCE			BUSINESS ACTIVITY, IF ANY, OF SOURCE			
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)			
\$			\$				
\$			\$				
\$			\$				
NAME OF SOURCE (Not an Acronym	)	► NAME OF SOURCE	(Not an Acron	ym)			
ADDRESS (Business Address Accepta	ble)	ADDRESS (Business	s Address Acce	eptable)			
BUSINESS ACTIVITY, IF ANY, OF SO	URCE	BUSINESS ACTIVITY	Y, IF ANY, OF	SOURCE			
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)			
\$			\$				
			\$				
			\$				

### FORM 700 - STATEMENT OF ECONOMIC INTERESTS **EXPANDED STATEMENT**

#### Alvarado, Gilbert

- 1. Shafter Community Development Agency Board Member
- 2. City Charitable Purpose Foundation Board Member
- 3. Civic Improvement Institute Board Member
- 4. City Software Institute Board Member
- 5. Industrial Development Authority Board Member6. Joint Powers Financing Authority Board Member